CLAIMS ONLY

Application Number	Filing Date
10000150	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 1-04-00		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
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40		1				
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43		1				
44		1				
45		1				
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49						
50						
Total Indep	4					
Total Depend	41					
Total Claims	45					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						